the application of which				<del>.,,</del>					
is attached hereto	OR	🖾 was fil	🖾 was filed on December 22, 2003						
		as United	United States Application Number or PCT International Application umber PCT/JP03/16444						
	•		(Confirmation No), and was amended on						
		<u>May 31</u>	May 31, 2004 (if applicable).						
I hereby state that I have reviewed an by any amendment specifically referre		contents of the	bove identified	appli	cation, in	cluding the	claims, as ame		
I acknowledge the duty to disclose continuation-in-part application(s), mathe national or PCT international filing	aterial information	n which became	available betw						
I hereby claim foreign priority under breeder's rights certificate(s), or 365( United States of America, listed beloinventor's or plant breeder's rights of	a) of any PCT int w and have also ertificate(s), or a	ternational appli- identified below	cation(s) which	design	nated at lox, any fo	east one correign appli	untry other that cation(s) for pa		
application on which priority is claime	u.								
application on which priority is claims  Prior Application Number(s)		antry	Filing I	ate		Prior Yes	rity Claimed No		
	Cou	untry Dan	Filing I January		2003		•		
Prior Application Number(s) 2003-009678	Cou Jap	oan	January	17,	<del></del>	Yes 🔯	No 🗆		
Prior Application Number(s) 2003-009678  I hereby claim benefit under 35 United	Cou Jap I States Code §11	9(e) of any Unit	January	17, ional a	pplication	Yes 🔯	No 🗆		
Prior Application Number(s) 2003-009678  I hereby claim benefit under 35 United	Cou Jap	9(e) of any Unit	January	17, ional a	<del></del>	Yes 🔯	No 🗆		
Prior Application Number(s) 2003-009678  I hereby claim benefit under 35 United	Cou Jap  I States Code §11: plication Number(s)  ed States Code § States, listed belocates or PCT Intelledge my duty to	9(e) of any Unit	January  ed States provis  ted States applies the subject mation in the man	17, ional a Filin cation atter of the present to	mpplication g Date  (s) or §30 f each of ovided by the pate	Yes  (s) listed by  (55(c) of any the claims of the first parantability of	elow.  y PCT Internate of this application application this application this application a		

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if

plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Docket No.:

[Page 1 of 2]

discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under

WASHINGTON OFFICE

23373

CUSTOMER NUMBER

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the

the same USPTO Customer Number.

validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:									
Given Name (first and middle [if any]) Kazur	Family Name or Surname SHIIKUMA								
Inventor's Signature 2	azumi Shiikum	維熊	Date	June 21, 2005					
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NAME OF SECOND INVENTOR:									
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature		Date							
Residence: City	State	Country		Citizenship					
Mailing Address:									
City	State	Zip		Country					
NAME OF THIRD INVENTOR:			_						
Given Name (first and middle [if any])		Family Name or Surname							
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Mailing Address:	T								
City	State	Zip		Country					
NAME OF FOURTH INVENTOR:									
Given Name (first and middle [if any]) Family Name or Surname									
Inventor's Signature			Date						
Residence: City	State	Country		Citizenship					
Mailing Address:									
City	State	Zip		Country					
NAME OF FIFTH INVENTOR:									
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature		Date							
Residence: City	State	Country		Citizenship					
Mailing Address:									
City	State	Zip Country		Country					
NAME OF SIXTH INVENTOR:									